

STATE OF WISCONSIN, CIRCUIT COURT, \_\_\_\_\_ COUNTY

For Official Use

IN THE INTEREST OF

**Notice of Hearing  
(Juvenile)**

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Case No. \_\_\_\_\_

This case is scheduled for a hearing as indicated below:

**NOTICE OF HEARING**

Date	Time	Location (Include Room No.)
Circuit Court Judge/Circuit Court Commissioner		

- ☐ Temporary Physical Custody  
☐ Waiver of Juvenile Jurisdiction  
☐ Plea  
☐ Hearing on Petition  
☐ Motion(s)  
☐ Pre-trial  
☐ Fact Finding  
☐ Court  
☐ Jury \_\_\_\_\_ person(s)  
☐ Disposition  
☐ Extension  
☐ Change of Placement  
☐ Revision  
☐ Permanency Plan Review  
☐ Other: \_\_\_\_\_

- **If this hearing is for waiver of juvenile jurisdiction, the juvenile must be represented by counsel and any request for a substitution of judge must be filed before the close of the working day before the day the waiver hearing is scheduled.**
- You have the right to have an attorney present. A juvenile 14 or under alleged to be delinquent must be represented by an attorney.
- If a child/juvenile wants to be represented by an attorney, or the juvenile is required to be represented by an attorney, the State Public Defender will appoint one. Based on ability to pay, the parents may be ordered to reimburse the state or county for the cost of an attorney.

☐ See attached

If you require reasonable accommodations to participate in the court process due to a disability, please call \_\_\_\_\_ at least 10 days prior to the scheduled court date. Please note that the court does not provide transportation.

DISTRIBUTION	Personal Service	Mail Notice	TELEPHONE NOTICE			
			NAME	DATE	TIME	BY
1. Court - Original						
2. Child/Juvenile						
3. Mother						
4. Father						
5. Prosecutor						
6. Child's/Juvenile's Attorney/GAL						
7. Dept. Soc. Services						
8. Foster Parents/Treatment Foster Parents						
Physical Custodian						